



BEST AVAILABLE COPY

PATENT
450100-02102

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s) : Yoichiro Sako et al.
Serial No. : 09/406,486
For : INFORMATION DISTRIBUTING METHOD AND
SYSTEM
Filed : September 27, 1999
Examiner : Backer, Firmin
Art Unit : 3621

745 Fifth Avenue
New York, NY 10151

I hereby certify that this correspondence is being deposited with
the United States Postal Service as first class mail in an envelope
addressed to: Mail Stop AF Commissioner for Patents, P.O.
Box 1450, Alexandria, VA 22313-1450, on December 19, 2003.

Gordon Kessler, Reg. No. 38,511

Name of Applicant, Assignee or Registered Representative

Gordon Kessler
Signature

December 19, 2003

Date of Signature

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GROUP 3600

AMENDMENT AFTER FINAL REJECTION UNDER 37 C.F.R. § 1.116

Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the outstanding Final Office Action dated November 5, 2003,
please amend this application as follows.

[Handwritten mark]



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Sir: Transmitted herewith is an amendment in the above-identified application.

- ___ No additional fee is required.
X The fee has been calculated as shown below.
___ This is an application of a small entity under 37 CFR 1.9(f), and the amounts shown in parentheses apply.

Claims as Amended

(1)	(2) Claims remaining after amendment	(3)	(4) Highest number previously paid for	(5) Present extra	(6) Rate	(7) Additional fee
Total claims	26	Minus	= 22	4 x	\$18(9)	= \$72.00
Independent claims	7	Minus	= 7	0 x	\$84(42)	= \$ 0.00
				Total additional fee for this amendment		\$ 72.00

- * If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.
** If the highest number of total claims previously paid for is less than 20, write "20" in this space.
*** If the highest number of independent claims previously paid for is less than 3, write "3" in this space.

- ___ This application contains a multiple dependent claim. The required fee of \$280 (\$140) has been previously paid __, or is paid herewith __.
- ☐ This response is being filed within the month following the expiration of the term originally set therefor. This is a petition to request a ___ month extension of time. A check covering the cost of the petition is enclosed.
- ☒ A check in the amount of \$72.00 is attached, which covers the cost of ☒ additional claims ___ petition for extension of time.
- ___ Charge \$__ to Deposit Account No. 50-0320.
- X Please charge any additional fees incurred by reason of this response or credit any overpayment to Deposit Account No. 50-0320.

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Gordon Kessler, Reg. No. 38,511

Name of Applicant, Assignee or Registered Representative

Gordon Kessler
Signature
December 19, 2003
Date of Signature

FROMMER LAWRENCE & HAUG LLP
Attorneys for Applicant(s)

Gordon Kessler
By: Gordon Kessler
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